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WHEN RECORDED RETURN TO:

Janet Huston
P.O. Box 953
La Conner, WA 98257

Skagit County Auditor

\$82.00

10/18/2016 Page

1 of

10 10:42AM

DOCUMENT TITLE(S):

Power of Attoerney

GUARDIAN NORTHWEST TITLE CO.

112666

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:

Janet Huston, as her separate estate

GRANTEES:

Tim Bruce

ABBREVIATED LEGAL DESCRIPTION:

Lot 4-5, Block 11, Calhoun Addition to LaConner, according to the Plat thereof filed in Volume 1 of Plats at Page(s) 14, records of Skagit County, Washington.

TAX PARCEL NUMBER(S):

P102244, 4124-011-005-0003

*Addendum to
Durable Powers of
Attorney dated
Sept. 26-2003*

DURABLE POWER OF ATTORNEY

OF

Janet Huston

I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Janet Huston, who resides at 409 Centre, LaConner, Washington 98257, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below.

Name: Tim Bruce
Address: P.O. Box 953
LaConner, Washington 98257

II. EFFECTIVE TIME

This Power of Attorney is effective only if I become incapacitated or incapable of managing my financial affairs, as determined by the written certification of my physician (or a physician chosen by my attorney-in-fact if I do not have a physician or if my physician is unavailable).

Pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and any similar state laws, and exclusively for the purpose of making a determination of my incapacitation or incapability of managing my financial affairs and obtaining an affidavit of such incapacitation by a physician, I authorize any health care provider to disclose to the person named herein as my "attorney-in-fact," any pertinent individually identifiable health information sufficient to determine whether I am by reason of illness or mental or physical disability incapacitated or incapable of managing my financial affairs. In exercising such authority, my attorney-in-fact shall constitute my 'Personal Representative' as defined by HIPAA.

III. POWERS OF ATTORNEY-IN-FACT

My attorney-in-fact shall have the power to act in my name, place and stead in any way which I myself could do with respect to the following matters to the extent permitted by law:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.

(DH)

REAL ESTATE TRANSACTIONS:

- Manage, sell, transfer, lease, mortgage, pledge, refinance, insure, maintain, improve, and perform any and all other acts with respect to real property and interests in real property that I own now or later acquire.
- Defend, settle and enforce by litigation a claim to real property and interests in real property that I own now or later acquire.
- Buy, lease or otherwise acquire real property or an interest in real property.
- Execute deeds, mortgages, releases, satisfactions and other instruments relating to real property and interests in real property that I own now or later acquire.

(DH)

PERSONAL PROPERTY TRANSACTIONS:

Buy or otherwise acquire ownership or possession of, sell or otherwise dispose of, mortgage, pledge, assign, lease, insure, maintain, improve, pay taxes on, and otherwise manage tangible personal property and interests thereof that I now own or later acquire.

(DH)

STOCK AND BOND TRANSACTIONS:

- Buy, sell, pledge and exchange stocks, mutual funds, bonds, options, commodity futures and all other types of securities in my name.
- Sign, accept and deliver in my name certificates, contracts or other documents relating to the foregoing, including agreements with brokers or agents.

- Exercise voting and other rights and enter into agreements relating thereto.

(2/14) **BANKING TRANSACTIONS:**

Conduct any business with banks and other financial institutions, including but not limited to the following:

- Signing and endorsing all checks and drafts in my name.
- Withdrawing funds from accounts.
- Opening, maintaining and closing accounts or other banking arrangements.
- Hiring safe deposit boxes, entering into them and removing articles from them.
- Borrowing money, pledging property as security, and negotiating terms of debt payments.
- Applying for and receiving letters of credit, credit cards and traveler's checks, and giving an indemnity or other agreement in connection with letters of credit.

(2/14) **BUSINESS OPERATING TRANSACTIONS:**

- Buy, sell, expand, reduce or terminate a business interest.
- Manage and operate any business or business interest that I now have or later acquire, including but not limited to the following:
 - Entering into, amending, enforcing and terminating any business contract.
 - Disbursing, receiving and demanding money in the operation of the business.
 - Merging, reorganizing or selling a business or part of a business.
 - Determining the location, nature, and method for operating the business.
 - Hiring and firing employees and agents.
- To the extent that an agent is permitted by law to act for a principal, and subject to the terms of any partnership or operating agreement, to perform any duty and exercise any right, power or privilege that I have under a partnership or operating agreement, to enforce the terms of a partnership or operating agreement, and to defend, arbitrate and settle any

legal proceeding to which I am a party because of membership in a partnership or limited liability company.

- Exercise a right, power or privilege that I have as the holder of a bond, share or instrument of similar character and to defend, arbitrate and settle any legal proceeding to which I am a party because of any bond, share or similar instrument.

(24) LEGAL ACTIONS:

To act for me in all legal matters, whether claims in my favor or against me, including but not limited to retaining attorneys on my behalf; appearing for me in all actions and proceedings, commencing actions in my name, signing all documents, submitting claims to arbitration or mediation, settling claims and paying judgments and settlements.

(24) GOVERNMENT ASSISTANCE:

Claim and collect benefits from social security, Medicare, Medicaid, or other government programs or civil or military service.

(24) RETIREMENT PLANS:

To act for me in all matters that affect my retirement or pension plans, including but not limited to selecting payment options, designating beneficiaries, making contributions, exercising investment powers, making "rollovers" of plan benefits, borrowing or selling assets from the plan, and, if I am a spouse who is not employed, waiving my right to be a beneficiary of a joint or survivor annuity.

(24) TAXES:

- Prepare, exercise any available election, and sign tax returns and related documents.
- Pay taxes due, collect refunds, post bonds, receive confidential information.
- Represent me in all income tax matters before any federal, state, or local tax collecting agency.

(24)

PET AND ANIMAL CARE:

To do all acts necessary to maintain the customary standard of living of all pets and animals currently supported by me, including, but not limited to, providing and paying for shelter, food, and veterinary care.

(24)

OTHER:

Compensation for any out of pocket expenses.

My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as the attorney-in-fact deems necessary or appropriate in order to fully effectuate the purposes of the foregoing matters.

IV. GENERAL PROVISIONS

1. Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy or copy of this document may rely on and act under it. Revocation or termination of this Power of Attorney shall be ineffective as to the third party unless and until actual notice or knowledge of the revocation or termination has been received by the third party. I, for myself and for my heirs, executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any third party from any and all claims because of reliance on this instrument in good faith.

2. Severability. If any provision hereof is found to be invalid or unenforceable, such invalidity or unenforceability shall not affect the other provisions of this document, and such other provisions shall be given effect without the invalid or unenforceable provision.

3. Revocation. I may revoke this Power of Attorney at any time.

4. Accounting. My attorney-in-fact shall provide an accounting for all funds handled and all acts performed as my attorney-in-fact, but only upon my request or the request of a personal representative or a fiduciary acting on my behalf. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived.

5. Compensation and Reimbursement. My attorney-in-fact shall be entitled to reasonable compensation for services provided on my behalf pursuant to this Power of Attorney. My attorney-in-fact shall be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this Power of Attorney.

6. No Personal Benefit. Except as specifically provided for in this document, my attorney-in-fact is prohibited from personally benefiting from any transaction engaged in or on my behalf, or from using my assets to discharge any of his or her own legal obligations, excluding me and those I am legally obligated to support.

7. Commingling of Funds. My attorney-in-fact is not permitted to commingle my funds and assets with his or her own.

8. Liability of Attorney-in-Fact. All persons or entities who in good faith endeavor to carry out the provisions of this Power of Attorney shall not be liable to me, my estate, or my heirs, for any damages or claims arising because of their actions or inactions based on this Power of Attorney. My estate shall indemnify and hold them harmless. A successor attorney-in-fact shall not be liable for acts of a prior attorney-in-fact.

UNOFFICIAL DOCUMENT

IN WITNESS WHEREOF, the undersigned has executed this Power of Attorney on the date set forth below.

Date: 1/4/04



Signature of Janet Huston

This document was prepared by:

Name: Janet Huston

Address: P.O. Box 1139
LaConner, Washington 98254

WITNESSES

By signing as a witness, I am acknowledging the signature of the principal who signed in my presence, and the fact that he or she stated that this Power of Attorney reflects his or her wishes and is being executed voluntarily. I believe the principal to be of sound mind. I have not been appointed as attorney-in-fact by the principal, am not related to him or her by blood, marriage or adoption, and, to the best of my knowledge, am not entitled to any portion of his or her estate under his or her will.

1. Kathryn D Morgan Kathryn D Morgan
(Signature of witness) (Print Name)

167 Maple St
(Address)

Camano Is, WA 98282
(City, State, ZIP)

2. JoAnn B. Rogge JoAnn B. Rogge
(Signature of witness) (Print Name)

1820 N. 30th St
(Address)

Mount Vernon WA 98273
(City, State, ZIP)

ACKNOWLEDGMENT
OF NOTARY PUBLIC

State of Washington

County of Spirit

On this 4th day of Jan., 2005, before me, the undersigned Notary Public, personally appeared Janet Huston, personally known to me (or proved to me on the basis of satisfactory evidence) to be the individual who signed the foregoing Power of Attorney and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by such signature, the person executed the instrument.

Witness my hand and seal.

Signature of Notary Public: Marella D. Dubuque
MARELLA D. DUBUQUE

